

Frequently Asked Questions (FAQ)

COVID-19 and Gender Aware Cash and Voucher Assistance (CVA)

Programming



June 2020

(This FAQ is prepared for the CVA professional to build their technical capacity in relation to use of cash and voucher transfers across the sectors particularly under COVID-19 response. Please contact Aftab Alam (Aftab.Alam@plan-international.org) for further information and assistance).

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1. What is the impact of COVID-19 particularly on ongoing Country Office's (CO)¹ gender aware CVA activities?

Impact of COVID-19

- The COVID-19, apart from being a pandemic itself has led to a global economic crisis, with severe and potentially lasting impacts on economic activity, employment and trade.
- Beyond the tragic loss of human life, the crisis is likely to increase poverty and inequality affecting even more those who are already the most vulnerable.
- The table below shows the different impact of COVID-19 on different groups of people and sectors:

Effect of COVID-19	Socioeconomic impact	Who are affected?
Illness/death Risk of contagion (especially high for women as health workers and who carry the main burden of care work) Social/physical distancing Lock down, restricted movement Increase in domestic and gender-based violence Increase in unpaid care work for women and girls contribute to time poverty.	Income loss/reduction Job loss/insecurity Food insecurity/threat of famine/loss of livelihoods Negative coping strategies Reverse on gains and progress regarding gender equality and inclusion Reduction in access to and quality of basic services and interruption to crucial SRHR (Sexual and Reproductive Health and Rights) services and information	Different groups (age, disability, ethnicity, girls and boys, adolescents and youth, pregnant and lactating women) migrants and other vulnerable groups etc) Employment sector Employment type (formal, informal; self-employed vs wagers) Rural and urban population

Impact of COVID-19 on COs' CVA activities- most of the CVA activities require mass-gathering (e.g. for targeting, registration, implementation, distribution and Post Distribution Monitoring). A significant number of staff from across the departments need to be engaged to complete those tasks. There is also a need of greater field movement for verification, coordination and meetings. Risk of infection or spread of the disease is higher under those circumstances. Further, the Financial Service Provider (FSP) might not be willing to continue the distribution. Moreover, the situation of lockdown could further hinder the beneficiaries to access the markets and affect the supply chain risking for non-availability of the required items in the market as well as the price-inflation. Girls and women's freedom of movement can be reduced due to an increased unpaid and care workload (as a result of children being at home with schools closed, care to the sick and elderly, more demands from male counterparts) which can exclude them from participating in CVA activities meaningfully. In case, the activities need to be continued by local partners who do not have enough female staff may expose to an increased risk of Sexual Exploitation and Abuse (SEA)- for example during the process of identification of beneficiaries.

¹ Some organizations use term-Program Offices or Field Office

2. My Country Office is interested to start gender aware CVA. Is that possible under the given situation and how?

This largely depends on the prevailing context. For the CVA to be feasible, there should be a functioning market where the items are readily available with adequate stock; established supply chain, stable price of the items, good security environment in the markets and in the target communities, appropriate FSP and adequate technical capacity of the COs. Also, under the current situation, it is possible that FSP might not be readily available or willing to work. Coordination with the government and peer agencies might also be challenging. Also, there might be movement restrictions and risk of infection-to both staff and other individuals. Please evaluate all these factors carefully and systematically before arriving at a conclusion.

When you need to continue your ongoing CVA initiatives, please undertake the following

- Organize the awareness raising sessions on COVID-19 outbreak in accordance with the WHO Guidelines. Include SEA and Gender-Based Violence (GBV) including Intimate Partner Violence (IPV) and Domestic Violence (DV) messages in your awareness sessions. Awareness raising can be undertaken at distribution sites through leaflets or IEC material. Identify a schedule convenient to all segments of the affected population including the people in quarantine.
- At the distribution sites, ensure access to handwashing stations and/or hand sanitizer for the staff, beneficiaries and service providers. Ensure, this doesn't mean more workload for girls and women. It is a shared responsibility for the provision of water and soap in the absence of tap at the handwashing stations. Remember, a crisis also offers opportunities for a shift in gender roles including sharing of water fetching responsibilities. Personal Protective Equipment (PPE) for the staff to be ensured.
- Divide all the distribution into the multiple sites and on different dates to avoid large crowds. Where crowding occurs at distribution/redemption sites, consider increasing the distribution points for equal access to women and men.
- Ensure adequate distribution sites to maintain social / physical distancing to at least 1.5 meter (as per the WHO/country advisory) among beneficiaries and the staff. Remember, different sites must offer equal chance for women and men to leave safely in case of an emergency.
- Where contextually feasible, assess quickly and allocate additional distribution points to allow the beneficiaries a shorter transit time and more options to redeem their assistance. Ensure pregnant and lactating adolescent girls and women, people with mobility problems, old age and other vulnerable people are served in priority.
- Avoid non-critical assessment, distribution, focus group discussion (FGD), and identity verification and authentication exercises. Unless it is absolutely necessary, the biometric authentication at redemption/transaction point could be abolished.
- Where possible, conduct/revise market assessment remotely to take well informed decision on response modality. Assessments must be gender responsive- for example, market information must have disaggregated data on female and male vendors, and measures need to be put in place to ensure they participate equitably in the programming.
- It is strongly advised to distribute the cash through financial institutions like banks using digital platform (mobile money transfer). Most of the time, women do not have appropriate documents to access cash through bank / mobile phones or household finances. You will need to put appropriate measures in place for compliance of KYC (Know Your Customer) documents. In the long run, also consider having additional programs to reduce the financial and technological literacy gap between

women and men. Ask partners and peer agencies if they have conducted market assessments already. Check secondary sources of information, local news etc. and ask local staff for updates by phone call about market functionality and price changes in their towns / villages. Review the most recent gender analysis and consider how your target groups will be affected differently by the crisis (e.g. do women have access to phones or bank accounts? Will the economic stress exacerbate domestic violence?).

- Ensure that there are clearly marked entrance and exit points at the distribution sites, verification point, collection point and exit to channel off traffic and allow personal space. Please segregate those points as much as possible to avoid keeping vulnerable people/girls/women too long in the queues for effective crowd movement.
- Ask beneficiaries to leave the distribution site immediately after the collection of the support.
- Consider increasing response through cash assistance and where possible increase the transfer amount to cover subsequent months (eg. 2-3 months) if possible. This will allow the beneficiaries to prioritize, feel protected and thus will not go out to collect money or shop for necessary items at quick intervals. However, this must be decided in consultation with women, men, girls and boys on the differentiated risks to each group.

3. Is it possible to switch-over from in-kind to CVA quickly for the ongoing projects, and if yes, how?

This should be possible in '*principle*'. It is suggested the CVA Focal Point prepares a dash-board (or matrix in a simple Excel sheet) outlining all the possible distributions through CVA and thereby analyse the local market-situations (preferable remotely) to understand the scope of their supply. In many occasions, the local traders might have established 'informal' supply chain system, which could even function during the situation of restricted movement. Furthermore, it is also necessary to assess other preconditions as mentioned in the answer of Q2.

Please do look for any contingency fund under the grant from which the expenses under change in modality could be used. Liaise with your respective donor(s) through National Offices (NO)² for the change in modality or in extreme circumstance "suspension of grant under force majeure" in accordance with the donor compliance. This should be agreed in writing from the donor. For example, for donors DfID, EC, ECHO, UN, World Bank, changing from cash to vouchers for the same beneficiaries would need a donor approval first. Any changes not accepted by the donor may be disallowed.

4. Why should the Country Offices adopt CVA for Covid-19 response?

In addition to the general advantages of CVA over other modalities of support such as providing choice and flexibility to the beneficiaries, cost-efficiency, less logistic hassles, and a dignified means of support, the CVA has the following relevance in COVID-19 response:

- The affected population might have varied needs such as additional health support for their family members including personal and intimate needs like those related to menstrual hygiene management and sexual health. Also on the livelihoods, the needs might be wider- on-farm, off-farm or livestock. Further, there are numerous trades within these broad categories. Only the CVA can effectively meet individuals' greatest needs.

² Some organizations term it as Fundraising Office

- Previous health pandemics such as Ebola had disproportionately affected adolescent girls and women because of various overlapping socio-economic vulnerabilities and pre-existing gender inequalities. UCTs (unconditional cash transfers) and complementary activities contributed to the overall welfare. Moreover, CVA reinforces girls and women's self-confidence and agency, as through this modality, they can make their own decisions over their needs and priorities including self-care. Past experiences on public health management showed that women are the last to access health care when they need it. They cannot make decision over when to have treatment, one of the reasons being that they lack financial resources to afford on their own.
- CVA is a powerful means to protect girls and women against GBV and SEA as they can make informed decisions on what to have and when to have it. However, a risk assessment must inform the CVA activities to put in place the best strategies to avoid causing harm, such as increased IPV at household level. Considering the lockdown/border closure, the regular supply chain (pipeline) are likely to be severely disrupted. Thus, procurement, arrangements and distribution through in-kind might be logistically more challenging for the COs while this might be relatively easier through cash and/or vouchers because in several cases, the local traders have established '*informal*' supply chain and the materials could be available in the local markets easily.
- Feasibility study on CVA could also be undertaken remotely using telephonic means or through mobilizing local partner (if they are willing to work in the given circumstances). In most of the contexts, mobile money transfer services are available and accessible. This mechanism would avoid mass-gathering.
- Electronic transfers also help to minimize potential contamination and spread of the virus through the cash (note).
- Voucher distribution would also help to avoid large mass gathering. Staggered/different schedule and locations could be assigned to the beneficiaries to collect their entitlements.
- Cash distributions could also be done using local microfinance companies, remittance companies, local banks or CSOs with relatively less direct engagement of the Plan staff.
- Cash and voucher distribution generally demands less human resources than in-kind distributions. Therefore, potential risk to the staff and stakeholders are minimized.

5. Is cash or voucher feasible when the markets are closed and movements are restricted?

This has to be comprehensively, carefully and consistently analysed. Please see answer 2.

6. What is market analysis and what are the main approaches?

Broadly speaking, market analysis refers to the process of gathering and using information about markets to inform the response decisions. It can mean different things and can be conducted in countless contexts and for a number of very different reasons.

Emergency market analysis is distinct that it is used in humanitarian contexts, to determine whether and how relief interventions (that provide lifesaving goods and services to crisis/disaster-affected people) should work through local markets (i.e. by providing cash grants or vouchers, or through local procurement) and/or otherwise support local markets.

A market analysis must be gender responsive. For example, market information must have disaggregated data on female and male vendors, and measures put in place to ensure they participate equitably in the programming.

In early recovery and development contexts, market analysis can be conducted to identify sectors with high potential for growth, to inform the development of business strategies for individual enterprises, to identify skill gaps and other challenges that act as barriers to good employment, and for other information purposes. Of course, market analysis is also conducted in the developed world, for many of the same reasons. Before starting any market analysis, it is very important that the team is clear about what approaches they would consider.

Key approaches included in market analysis are:

- Access – this usually means physical access but can include cultural access for different groups of people including girls, women, elderly, varied abilities, specific ethnic groups. For example whether women are allowed to go to market and if there are female traders. It can also assess whether there are protection risks involved in accessing market, such as distance, transport type, roadblocks, control groups etc.
- Availability of goods and their prices—a market analysis will look at specific goods needed by different segments of the affected communities such as menstrual hygiene supplies to fulfill project objectives or a broad range of commodities.

7. When should we conduct market assessment?

You may need to undertake a market assessment in the following situations:

- Pre-crisis, to feed into contingency planning and/or to inform the design of market strengthening interventions
- Immediately after the crisis, using a light touch approach (e.g. RAM tool- Rapid Assessment of Market)
- In the aftermath of a crisis, to inform market support interventions
- During the recovery stage, to inform livelihoods or market strengthening so that people increase their income, the supply of basic goods becomes more stable, and market systems are better able to serve the poor.

Remember, a market assessment is not a standalone exercise. It is a part of the overall need assessment. The data from other assessment (e.g. stakeholder assessment, risk assessment) will always be necessary to design a response. Beyond the initial assessment, you may want to continue monitoring the markets particularly during the response, implementation, as markets can evolve quickly.

8. What do we expect from a market assessment?

In crisis settings, depending on the set objectives, market analysis will serve to inform one or more programme decisions related to:

- The relevance of supporting the local market prior to a crisis to strengthen market actors and market access to withstand shocks.

- The most appropriate delivery modality for emergency response while also upholding our commitment to gender equality and inclusion.
- In practice, most of the market analysis undertaken in the aftermath of a crisis are used to inform the selection of the most appropriate modality to deliver a response. While this is a step in the right direction, practitioners should also consider looking at market support interventions on a more regular basis.

9. What is the best way to conduct a feasibility study including market analysis in C-19 context?

Feasibility study on cash and vouchers could be undertaken remotely using telephonic means/WFP's VAM or through mobilizing local partner (if they are willing and permitted to do so in the current circumstances). Use Plan International's gender compliant [CVA tools](#). Make conscious decisions to ensure women of different abilities and other vulnerable groups are included at all stages of feasibility study.

10. Who could be the target group for the gender aware CVA support under C-19 situation?

This depends on the project objective. Indicative target groups are:

- Household (HH) directly affected by COVID-19 (mandatory).
- HH whose children are missing out on school feeding while schools are closed
- HH with marginalized, vulnerable and excluded group.
- HH who have under 5 aged children and those children have been attending ECED (Early Childhood Education and Development)
- HH whose income has been severely impacted
- HH headed by single women
- HH headed by children
- HH with adolescents, especially girls
- HH with lactating mothers and pregnant women
- HH with pregnant/lactating adolescent girls
- HH with Persons with Disability (PwD)
- HH headed by elderly people

11. Which form of CVA support would be the most appropriate?

As a thumb rule, unconditional / multipurpose cash grants should be preferred. Cash is more feasible under the given circumstances compared to vouchers because of higher administrative requirements associated with the vouchers (e.g. quotation or tender, voucher printing, distribution, verification by the staff and submission of the vouchers by the traders to the office for a payment).

12. How can we distribute the cash or vouchers under the restricted environment?

This will depend on your context. You can complete a delivery mechanism assessment to determine the options available. Some possible mechanisms should be:

- Mobile money transfer
- Electronic wallet
- ATM cards
- Remittance agents
- Local traders
- Local cooperatives or microfinance companies

Choice of any mechanism will also depend on what is permitted by the government in your country of operation, and what beneficiaries have access to. Speak to your finance and logistics team to understand with which FSPs, the CO has existing contract with. Get in touch with the FSPs to find out if they can provide remote or mobile transfers. You will need to take into consideration whether your targeted beneficiaries have access to these transfer options. Women may be less likely to own a mobile phone-for example and also key document to match with KYC compliance. In the absence of KYC compliant documents you would need to coordinate with authorities/Cash Working Group to have a derogation for a crisis such as Covid-19 response.

13. If no mobile money transfer is available, what could be the next best option?

Explore a feasible solution which demands less movement of the staff and minimize large gatherings. Explore if local microfinance company or remittance agents can distribute the cash. Sometimes, local businessperson can also distribute the same. While doing so, ensure to follow staggered approach- provide different time slot for different beneficiaries.

14. What should be the cash transfer value?

The cash transfer value should be calculated in close coordination with National Cash Working Group (CWG) and the clusters. The value should be referenced to the recommended Minimum Expenditure Basket (MEB) as recommended by the CWG, lead agency (ex. WFP) and the existing social protection programmes or its equivalent in the interest of beneficiaries. Also consider the local market price under the given circumstances, which might have inflated significantly compared to the normal time.

15. What is the role of Cash Working Group and Clusters in the country/global level?

Cash Working Group is a coordination platform that helps to avoid possible duplication of response, organizes technical discussions as well as offers technical inputs, harmonizes practices such as definition of MEB or transfer values, carries out advocacy with the government and clusters on behalf of the participating agencies and manages knowledge base including funding information. Similarly, in some countries when Cash Working Group does not exist, the cluster can also provide its sectoral guidance. Thus, it is very important to actively take part in their meetings, especially now when CVA is likely to become more prominent in response to COVID-19. Each country office should allocate one dedicated CWG attendee, who should attend meeting, even remotely, and share notes of the meeting with colleagues including GH CVA team. Similarly, at the Global level, the Global Cash and Market Working group also provides global guidance on CVA in coordination with global peer agencies and platforms.

16. Can cash transmit the COVID-19 virus?

It might be possible that the contaminated banknotes present a public health risk for transmission of infectious diseases by acting as potential vectors, fomites³ and reservoirs for a wide range of bacteria and viruses. However, no systematic research has been carried out yet that support this hypothesis. Nevertheless, recipients should be encouraged to wash their hands frequently for 20 seconds at least after handling the cash.

17. How can the COVID-19 risks to the beneficiaries be avoided?

- Avoid mass gathering
- Follow staggered approach
- Provision hand washing/sanitation facilities at distribution sites
- Use telephone or virtual means as far as possible for assessments and monitoring
- Digital delivery mechanisms for populations where this is relevant and feasible
- Provide information on hygiene and sanitation in relation to COVID-19
- Conduct Post Distribution Monitoring through telephone or virtual means
- Use of masks: you may need to provide some for the most vulnerable families
- Follow the WHO protocols strictly.

18. How can the COVID-risks to the staff be avoided?

- Limit movements
- Use telephone or virtual means as far as possible
- Mobilize local partners (if they are willing and permitted to do so in the current circumstances)
- Use protective gears (mask)-remember the principle of 'safety first'
- Wash the hands with soap for minimum 20 seconds or use sanitizers, frequently
- Maintain social/ physical distancing (keeping at least 1.5meters apart)
- Take adequate rest, sleep at least 8 hours, eat nutritious food
- Report to the Line Manager if you are physically or psychologically not in a healthy state

19. Is there any possibility of linking the current CVA into social protection systems?

There is a growing advocacy in the humanitarian sector that emergency response and recovery works should be linked up with the social protection systems to provide lasting impact (shock responsive social protection systems). This could be done through a number of approaches viz vertical, horizontal, piggy backing, shadow aligning or refocusing. However, please note this approach demands a greater degree of coordination. Thus, check your local situation and consult your local Cash Working Group for more information. This would also be an opportunity to have your local Cash Working Group coordinates with your Protection Cluster and any

³ objects or materials which are likely to carry infection, such as clothes, utensils, furniture and may be currency notes

Gender Working Group to ensure the alignment. For details on CVA and Social Protection, please refer to the Annex 3.3: FAQ on CVA and SP.

20. How to ensure organizational compliance for the cash distributions?

First, identify all the necessary steps and processes of the cash distributions and then consult with the Operation and Finance team. Local Operation and Finance teams are in the best position to provide a solution.